O5-10-89 SHIPPER 20737

State of California Health and Welfate Agency
Form Approved OMB No. 2050-0039 (Expires 9-30-91)

See Instructions on Back of Page 6

Department of Health Services

WASTE MANIFEST C A ID 9 8 2 0 12 6 8 2 16	Manifest ocument No. 5 I I I	"	Page 1 In	formation in not require	the shaded . d by Federal
3. Generator's Name and Mailing Address BROADWAY		A, S	tate Manifest D		
1200 W. COVINA PARK WAY., COVINA, CA 9178	20			RART	7731
4. Generator's Phone (818 962-3611	90	8. S	late Generator	iD .	البرايو الناسا
5. Transporter 1 Company Name 6. US EPA ID Number				111	اللل
ON THE CONTRACT OF THE CONTRAC		C. S	late Transporter	's ID	
7. Transporter 2 Company Name SERVICES C A D O A 2 2 4 5 6 6 6 6 6 6 6 6 6 6 6 6 6	<u> </u>		anaporter's Pho ate Transporter		<u>) 698-0</u>
	1 1		ansporter's Pho		1031
9. Designated Facility Name and Site Address OMEGA RECOVERY SERVICES 10. US EPA ID Number			ate Facility's ID		
12504 E. WHITTIER BLVD		10	A DO 4	224	5100
WHITTIER, CA 90602		H, Fa	cility's Phone		
10 A D 0 4 2 2 4	500	<u></u>	(213) 698	2.0991	
11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Cont	ainers	13, Total Quantity	14,	Wat
* HAZARDOUS WASTE LIQUID N.O.S UN 9189	No.	Туре		Wt/Vo	11
(R-11)				1.5	State
	019	DM	0050		EPA/Other
b.	CILII	10.01	2030	O_{G}	State
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가 되었다. 그 마이에는 이번을 수십 2일 위하는 것이다. 일 대한 사람들은 사람들이 생각하는 것이 되었다.		c.	ndling Codes fo	b,	
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15. Special Handling Instructions and Additional Information		с.	_ 1	d.	
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16. GENERATOR'S CECTERATION	fully and area		0)		
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